

PART B - FEE(S) TRANSMITTAL

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44702 7590 05/16/2006

OSTRAGER CHONG FLAHERTY & BROITMAN PC
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NEW YORK, NY 10177

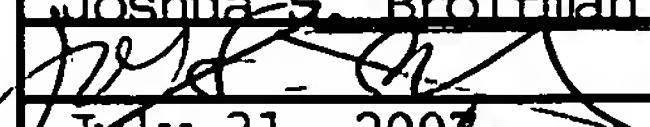
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01 FC:1501 1400.00 OP
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Joshua S. Broitman	(Depositor's name)
	(Signature)
July 31, 2006	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/605,586	10/10/2003	William C. Quan	03-0925	2585

TITLE OF INVENTION: INTERIOR SEATING ARCHITECTURE FOR AIRCRAFT

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	08/16/2006
EXAMINER	ART UNIT	CLASS-SUBCLASS			
COLLINS, TIMOTHY D	3643	244-118600			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Ostrager Chong

2 Flaherty & Broitman P.C.

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

The Boeing Company

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Chicago, Illinois

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are enclosed:

Issue Fee

Publication Fee (No small entity discount permitted)

Advance Order - # of Copies _____

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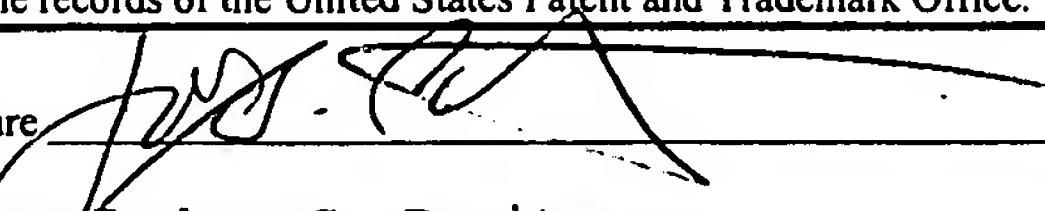
The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-3195 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature 

Typed or printed name Joshua S. Broitman

Date July 31, 2006

Registration No. 38,006

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